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PTO/SB/05 (08-00) (modified)

Approved for use through 9/30/2001, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

NEW UTILITY PATENT APPLICATION TRANSMITTAL <i>(only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket Number 23543-07570	
		First Named Inventor Guennadi V. Glinskii	
		Title Gene Segregation and Biological Sample Classification Methods	
		Express Mail Label No. EV342133757US	

APPLICATION ELEMENTS 1. <input checked="" type="checkbox"/> Fee Transmittal Form (deposit authorization) 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 3. <input checked="" type="checkbox"/> Specification Total Pages 322 <i>(preferred arrangement set forth below)</i> <input type="checkbox"/> Descriptive Title of the Invention <input type="checkbox"/> Cross Reference(s) to Related Case(s) <input type="checkbox"/> Statement Regarding Fed sponsored R & D <input type="checkbox"/> Background of the Invention <input type="checkbox"/> Brief Summary of the Invention <input type="checkbox"/> Brief Description of the Drawing(s) <input type="checkbox"/> Detailed Description <input type="checkbox"/> Claim or Claims <input type="checkbox"/> Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 100 5. Oath or Declaration a. <input checked="" type="checkbox"/> New Declaration Total Pages 1 <input checked="" type="checkbox"/> Executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	ACCOMPANYING APPLICATION PARTS 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 9. <input type="checkbox"/> Power of Attorney or Authorization of Agent 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement 11. <input checked="" type="checkbox"/> Preliminary Amendment 12. <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Citation(s) 13. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 14. <input checked="" type="checkbox"/> Return Postcard 15. <input type="checkbox"/> 16. <input type="checkbox"/> 17. <input type="checkbox"/>
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18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: ____/____ Prior application information: Examiner: _____ Group/Art Unit: _____ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuing or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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19. CORRESPONDENCE ADDRESS	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div> <input checked="" type="checkbox"/> Customer Number </div> <div style="font-size: 2em; font-weight: bold;">00758</div> </div>	

Name (Print/Type)	Michael J. Shuster	Registration No. (Attorney/Agent)	41,310
Signature			Date
		09/10/03	

23543/07570/SF/5106810.1

10/660434
 09/10/03

FEE TRANSMITTAL
for FY 2003

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 487.00**Complete if Known**

Application Number	NEW APPLICATION
Filing Date	September 10, 2003
First Named Inventor	Guennadi V. Glinskii
Examiner Name	Not known
Art Unit	Not known
Attorney Docket No.	23543-07570

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account:

Deposit Account Number 19-2555

Deposit Account Name Fenwick & West LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Code	Fee (\$)	Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	375.
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$) 375.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims		Fee from below		Fee Paid				
Total Claims	<table><tr><td>28</td></tr></table>	28	-20**=	<table><tr><td>8</td></tr></table>	8	x	<table><tr><td>9</td></tr></table>	9	= <table><tr><td>72.</td></tr></table>	72.
28										
8										
9										
72.										
Independent Claims	<table><tr><td>2</td></tr></table>	2	-3**=	<table><tr><td>0</td></tr></table>	0	x		= <table><tr><td></td></tr></table>		
2										
0										
Multiple Dependent						= <table><tr><td></td></tr></table>				

Large Entity		Small Entity		Fee Description	Fee Paid
Code	Fee (\$)	Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$) 72.00

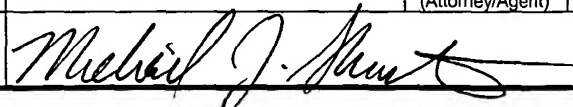
**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Code	Fee (\$)	Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(g)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40.00
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify)					
SUBTOTAL (3)					(\$) 40.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name (Print/Type)	Michael J. Shuster	Registration No. (Attorney/Agent)	41,310	Complete (if applicable)
Signature		Date	09/10/03	Telephone (415) 875-2413

23543/07570/SF/5106814.1